

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>M G</i>		<i>7/9/99</i>
O.I.P.E. CLASSIFIER		<i>100511</i>	<i>7-14-99</i>
FORMALITY REVIEW			<i>7-26-99</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	0	0	
2	0	0	
3	0	0	
4	0	0	
5	0	0	
6	0	0	
7	0	0	
8	0	0	
9	0	0	
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44	0	0	
45	0	0	
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48	0	0	
49	0	0	
50	0	0	

Claim	Final	Original	Date
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52	0	0	
53	0	0	
54	0	0	
55	0	0	
56	0	0	
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58	0	0	
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97	0	0	
98	0	0	
99	0	0	
100	0	0	

Claim	Final	Original	Date
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102	0	0	
103	0	0	
104	0	0	
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107	0	0	
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145	0	0	
146	0	0	
147	0	0	
148	0	0	
149	0	0	
150	0	0	

If more than 150 claims or 10 actions  
staple additional sheet here